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EFS ID:

11974

Application ID:

09682142

PERMEABLE-REACTIVE BARRIER

Title of Invention:

MONITORING METHOD AND

SYSTEM

First Named Inventor:

Timothy Sivavec

Domestic/Foreign Application:

Domestic Application

Filing Date:

null

Effective Receipt Date:

2001-07-26

Submission Type:

Utility Patent Filing

Filing Type:

new-utility

Confirmation Number:

0

Attorney Docket Number:

RD-28314

cn=Noreen C. Johnson, ou=Registered Attorneys, ou=Patent and

Digital Certificate Holder:

Trademark Office, ou=Department of Commerce, o=U.S.

Government, c=US

Certificate Message Digest:

n9leD1V0vMb2me/LYaaGWw==

Total Fees Authorized:

\$1778.0

Payment Category:

DA - Deposit Account

Deposit Account Number:

70868

Deposit Account Name:

Noreen C. Johnson

TRANSMITTAL FORM



Electronic Version 1.0.2

Stylesheet Version: 1.0

Attorney Docket Number:

RD-28314

PERMEABLE-REACTIVE BARRIER MONITORING METHOD AND SYSTEM

First Named Inventor: Timothy M. Sivavec

SUBMITTED BY

Name:

Noreen C. Johnson

Registration Number:

38,929

Electronic Signature Mark: NCJ

Date Signed: 20010726

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Attached Files:

bibd-transmittal

JOHNSONRD-28314apds.xml

fee-transmittal

JOHNSONRD-28314fee.xml

specification

RD28314.xml

declaration

Dec1.tif

declaration

Dec2.tif

Attached Image File(s):

Comments:

DECLARATION FOR PATENT APPLICATION

Docket Nurr RD-28,3°

My residence, post office address and citizen	enship are as stated below ne	xt to my name.	
I believe I am the original, first and sole invenames are listed below) of the subject matter			
PERMEABLE-REACTIVE BARRIER M	IONITORING METHOD AN	ID SYSTEM	
·			
		· · ·	
the specification of which is attached hereto	o unless the following box is c	hecked:	
was filed on as United and was amended on	States Application Number o (if applicable).	r PCT International Applica	ation Number
I hereby state that I have reviewed and und by any amendment referred to above.	lerstand the contents of the at	cove identified specification	n, including the claims, as a
I acknowledge the duty to disclose informal §1.56. I hereby claim foreign priority benef inventor's certificate listed below and have date before that of the application on which	fits under Title 35, United State also identified below any forein priority is claimed.	es Code, §119(a)-(d) of an ign application for patent o	y foreign application(s) for p
Prior Foreign Application			Priority Claimed
(Number)	(Country)	(Day/Month/Year Filed	Yes No
(Number)	(Country)	(Day/Month/Year Filed	Yes No
I hereby claim the benefit under Title 3 below.			
(Application Number)	(Filing Date)		
(Application Number)	(Filing Date)	······································	
I hereby claim the benefit under Title 35, U the subject matter of each of the claims of provided by the first paragraph of Title 35, material to patentability as defined in Title the prior application and the national or PC	this application is not disclose United States Code, §112, I a 37, Code of Federal Regulation	od in the prior United State ocknowledge the duty to dis ons, §1.56 which became a	s application in the manner sclose information which is
(Application Number)	(Filing Date)	(Status -	patented, pending, abandor
(Application Number)	(Filing Date)	(Status -	patented, pending, abandor
I hereby appoint the following attorney(s and Trademark Office connected therewith		te this application and to	transact all business in t
•			
Address all telephone calls to: No	reen C. Johnson	at telephone number	(518) 387-7863

Docket Number RD-28,314

 belief are believed to be true and further that these statements were made with the knowledge that willful false statem the like so made are punishable by fine or imprisonment or both, under Section 1001 of Title 18 of the United States C that such willful false statements may jeopardize the validity of the application or any patent issued thereon. SOLE OR FIRST INVENTOR: Full name: Timothy Mark Sivavec Middle Name *5/4/0*1 mola Signature: Date Citizenship: USA Residence: Clifton Park, New York City and State Post Office Address: 17 Spice Mill Boulevard, Clifton Park, NY 12065 SECOND JOINT INVENTOR: Full name: Angelo Anthony Bracco Middle Name Last Name Signature: Albany, New York Citizenship: USA Residence: City and State Post Office Address: 40 Glendale Avenue, Albany, NY 12208 THIRD JOINT INVENTOR: Full name: Middle Name First Name Signature: Date _ Residence: _____ Citizenship: City and State Post Office Address: FOURTH JOINT INVENTOR: Full name: First Name Middle Name Last Name Signature: Date Residence: Citizenship: City and State Post Office Address:

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information

FEE TRANSMITTAL

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TOTAL FEES AUTHORIZED: \$ 1778

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SUBMITTED BY

Authorized Name:

Noreen C. Johnson

Electronic Signature Mark:

NCJ

Date Signed:

20010726

BASIC FILING FEE

Fee Description	Fee Code	Fee Paid	
Utility Filing Fee	101	\$ 7 10	

Subtotal For Basic Filing Fee: \$ 710

EXTRA CLAIM FEES

	Fee Code	Fee	Extra Claims	Fee Paid
Total Claims: 66	103	\$ 18	46	\$ 828
Independent Claims: 6	102	\$ 80	3	\$ 240

Subtotal For Extra Claims Fees: \$ 1068